U.S. Patent and Trademark (Office), DEPARMENT OF COMMERCE Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a valid OMB control number.

| PETITION                                                                                                                                                                                              | FOR EXTENSION OF TIME UNDER 37                                       | Docket Number (Optional) |                         |     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|--------------------------|-------------------------|-----|
| (Fees                                                                                                                                                                                                 | FY 2006 pursuant to the Consolidated Appropriations Act, 200         | 112740-1027              |                         |     |
| Application Number 10/516,776                                                                                                                                                                         |                                                                      |                          | Filed December 3, 2004  |     |
| For Transmission of MMS Messages with the Conversion of Data Types and/or Data Formats                                                                                                                |                                                                      |                          |                         |     |
| Art Unit 2635                                                                                                                                                                                         |                                                                      |                          | Examiner Niral M. Matin |     |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.                                                                |                                                                      |                          |                         |     |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):                                                                                       |                                                                      |                          |                         |     |
|                                                                                                                                                                                                       |                                                                      | Fee                      | Small Entity Fee        |     |
|                                                                                                                                                                                                       | One month (37 CFR 1.17(a)(1))                                        | \$120                    | \$60                    | \$  |
| X                                                                                                                                                                                                     | Two months (37 CFR 1.17(a)(2))                                       | \$450                    | \$225                   | \$  |
|                                                                                                                                                                                                       | Three months (37 CFR 1.17(a)(3))                                     | \$1020                   | \$510                   | \$  |
|                                                                                                                                                                                                       | Four months (37 CFR 1.17(a)(4))                                      | \$1590                   | \$795                   | \$  |
|                                                                                                                                                                                                       | Five months (37 CFR 1.17(a)(5))                                      | \$2160                   | \$1080                  | s   |
| Applicant claims small entity status. See 37 CFR 1.27.                                                                                                                                                |                                                                      |                          |                         |     |
| A check in the amount of the fee is enclosed.                                                                                                                                                         |                                                                      |                          |                         |     |
| Payment by credit card. Form PTO-2038 is attached.                                                                                                                                                    |                                                                      |                          |                         |     |
| x The Director has already been authorized to charge fees in this application to a Deposit Account.                                                                                                   |                                                                      |                          |                         |     |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-1818 I have enclosed a duplicate copy of this sheet.              |                                                                      |                          |                         |     |
| WARNING: Information on this form may become public. Credit card information should not be included on this form.<br>Provide credit card information and authorization on PTO-2038.                   |                                                                      |                          |                         |     |
| I am the applicant/inventor.                                                                                                                                                                          |                                                                      |                          |                         |     |
| assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).                                                                              |                                                                      |                          |                         |     |
| x attorney or agent of record. Registration Number 48,196                                                                                                                                             |                                                                      |                          |                         |     |
|                                                                                                                                                                                                       | attorney or agent under 37 CFR Registration number if acting under 3 | 1.34.<br>37 CFR 1.34     |                         |     |
|                                                                                                                                                                                                       | 100 SVI                                                              |                          | June 5, 2               | 007 |
| Signatu∕e                                                                                                                                                                                             |                                                                      |                          | Date                    |     |
| Peter Zura                                                                                                                                                                                            |                                                                      |                          | 312 807-4208            |     |
| Typed or printed name                                                                                                                                                                                 |                                                                      |                          | Telephone Number        |     |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |                                                                      |                          |                         |     |
| Total of forms are submitted.                                                                                                                                                                         |                                                                      |                          |                         |     |

This collection of Information is required by 37 CPR 1.188(a). The information is required to obtain or retain a benefit by the public which is to file (and by the IUSPTO to process) an application. Confidentially is governed by \$5 U.S.C. 122 and \$7 CPR 1.11 and 1.14. This collection is estimated to take 6 minutes occupiete, including gathering, preparing, and submitting the completed application from to the USPTO. Three will vary depending upon the individual cases. Any comments on the amount of this your equire to complete depictation from to the USPTO. Three will vary depending upon the individual cases. Any comments on the amount of this your equire to complete this form and/or suggestions for reducing his burden, should be sent to the Chief Information Office. Proceedings of the Chief Information Office. Assertantly, Var. 2251-1450, 20 No.17 SEND PEES OR COMPLETED. FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.